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BIBDATASHEET**CONFIRMATION NO. 2866**

Bib Data Sheet

SERIAL NUMBER 10/682,724	FILING DATE 10/10/2003 RULE	CLASS 702	GROUP ART UNIT 2857	ATTORNEY DOCKET NO. 10021054-1
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APPLICANTS

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** CONTINUING DATA ***** None, Mc

** FOREIGN APPLICATIONS ***** None, Mc

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/13/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY DE	SHEETS DRAWING 7	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Mohamed Sharini</i> Initials <i>MC</i>				

ADDRESS

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TITLE

Mass spectrometry performance enhancement

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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